Dust Mite Allergen Reduction Interventions (1994-2000)

	Havden 1997 Randomized Co	Bahir 1997 Randomized Contro avoidance measures	Weeks 1995 Randomized Con mattress and duv	Woodfolk 1995 Trial of the effication benzyl benzoate 1 on mite and cat a	Sette 1994 Randomized Controlled Trial of mattresses to reduce dust mites.	Marks 1994 Randomized Controlle plus tannic acid spray	Warburten 1994 Randomized Cont	 Author Date	Summary of Rev
	Randomized Controlled Trial of dust mite reduction, including a combination of encasement, weekly washing, bedroom carpet replacement, living room tannic acid in asthmatic mite sensitive children.	Randomized Controlled Trial of an acaricide and standard dust avoidance measures	Randomized Controlled Trial of benzyl benzoate sprayed on carpet, mattress and duvet plus encasement on dust mite levels.	Trial of the efficacy of Tannic Acid and other treatments, including benzyl benzoate moist powder, a 3% TA spray, and two carpet cleaners on mite and cat allergens in carpets within houses.	Randomized Controlled Trial of benzyl benzoate foam spray on mattresses to reduce dust mites.	Randomized Controlled Trial of mite reduction including encasement plus tannic acid spray.	Randomized Controlled Trial of High Efficiency Particulate Filters filters in 12 British atopic asthmatic children.	Method	Summary of Reviewed Recent Trials of Home Dust Mite Allergen
Dust mite allergen levels tell in the heathert, process, and free control groups. During the seven treatment periods, no differences were seen between the Der p 1 concentrations in the groups using the "anti-	Intervention and control had reduction in mite levels. Reduction in Peak Expiratory Flow Rate in intervention group.	Dust mite levels and symptom scores improved in all groups over the study period. No added benefit from acaricide. No clinical data reported.	Encasement alone reduced mattress dust mite levels. Acaricide nau no effect.	All treatments reduced mite levels but did not maintain low levels.	Intervention did not reduce mite levels or any clinical measures (Bronchial Hyperresponsiveness, or serum or nasal IgE).	Short term but not long term effect at six months on bed line levels. No effect on symptom scores, peak flow variability, lung function or Bronchial Hyperresponsiveness.	No effect on airborne mite antigen nor clinical measures (peak flow, spirometry, bronchial hyper-reactivity, or symptoms).	Kesuits	Mediterion and

Reduction of mother's mattress dust mite levels achieved (25%) prior to birth persisting (98%) at 6 months and (98%) at 1 year. Reduction of bedroom floor levels 54%, 63%, and 27%.	Randomized Controlled Trial of infants with atopic family history of mite reduction, including encasement, vacuum cleaner, vinyl flooring, arcosan, benzyl benzoate, linen washing, and washable toys.	2000	Custovic
Air exchange rate decreased and temperature and humidity increased and dust mite levels on carpets and mattresses increased.	Study of installation of insulated windows and central heating on apartment bedroom mite levels.	2000	Hirsch
Allergen levels fell in both intervention and control houses. Negative study.	Trial of mechanical ventilation (to control of humidity and temperature) to reduce mite allergen.	1999	Nivin
Intervention reduced dust mite antigen levels somewhat and reduced bronchial hyper-responsiveness, but there was no improvement in symptoms or pulmonary function.	Randomized Controlled Trial of mite reduction measures and asthma severity in 44 Seattle low income asthmatic children sensitive to mites.	1999	Shapiro
Mattress covers reduced mattress mite levels to 9.4%. No clinical improvement noted.	Randomized Controlled Trial of dust mite avoidance measures, including mattress covers and Arcosan on mite levels, peak flow and asthma symptom scores in 157 Dutch Asthmatics.	1999	Cloosterma n
relative humidity. Daily regimens of 4, 6, and 8 hours at 75% relative humidity alternating with 20, 18, and 16 hours, respectively, at 35% relative humidity provided sufficient moisture for small growths in population size.	humidity alternating with 22, 20, 18, and 16 hours at 0% or 35%		
Dust mite (d. farine) populations declined at daily regimens of 2 hours at 75% or 85% relative humidity alternating with 22 hours at 0% or 35%	Population growth was determined for dust mites at daily relative	1999	Arlian
Reductions of mite levels on carpet but not mattresses achieved with both treatments. No benefit to Bronchial Hyperresponsiveness.	CT of Acarosan plus detergent versus detergent versus control on carpets and bedding in reduction of mite levels.	1998	Lioy
Combined data did not suggest benefit of interventions on asthma symptoms or morning peak flow rates.	Meta-analysis of 23 studies of the efficacy of using chemical and physical measures to reduce mite exposure to reduce asthma symptoms.	1998	Goetzche

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